



House of Representatives

General Assembly

File No. 420

January Session, 2015

House Bill No. 6937

House of Representatives, April 2, 2015

The Committee on Public Health reported through REP. RITTER of the 1st Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

***AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING THE DEFINITIONS OF SEDATION
AND GENERAL ANESTHESIA.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 20-123a of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2015*):

3 For purposes of this section and section 20-123b, as amended by this
4 act:

5 [(a) "Conscious sedation" means a drug-induced state in which the
6 patient is calmed and relaxed, capable of making rational responses to
7 commands and has all protective reflexes intact, including the ability
8 to clear and maintain the patient's own airway in a patent state, but
9 does not include nitrous oxide sedation or the administration of a
10 single oral sedative or analgesic medication in a dose appropriate for
11 the unsupervised treatment of insomnia, anxiety or pain that does not
12 exceed the maximum recommended therapeutic dose established by

13 the federal Food and Drug Administration for unmonitored home
14 use;]

15 (1) "Deep sedation" means a drug-induced depression of
16 consciousness during which (A) a person cannot be easily aroused but
17 responds purposefully following repeated or painful stimulation, (B) a
18 person's ability to independently maintain ventilator function may be
19 impaired, (C) assistance may be required for a person to maintain his
20 or her airway and spontaneous ventilation may be inadequate, and (D)
21 cardiovascular function is usually maintained;

22 [(b)] (2) "General anesthesia" means [a controlled state of
23 unconsciousness produced by pharmacologic or nonpharmacologic
24 methods, or a combination thereof, accompanied by a partial or
25 complete loss of protective reflexes including an inability to
26 independently maintain an airway and to respond purposefully to
27 physical stimulation or verbal commands; and] a drug-induced loss of
28 consciousness during which (A) a person is not able to be aroused,
29 even by painful stimulation, (B) a person's ability to independently
30 maintain ventilator function is often impaired, (C) a person often
31 requires assistance in maintaining his or her airway and positive
32 pressure ventilation may be required because of depressed
33 spontaneous ventilation or drug-induced depression of neuromuscular
34 function, and (D) a person's cardiovascular function may be impaired;

35 (3) "Minimal sedation" means a minimally depressed level of
36 consciousness that (A) is produced by a pharmacological method that
37 retains a person's ability to independently and continuously maintain
38 an airway and to respond appropriately to physical stimulation or a
39 verbal command, (B) may result in modest impairment of cognitive
40 function and coordination but does not affect a person's ventilator and
41 cardiovascular function, and (C) is produced by nitrous oxide or an
42 orally administered sedative using not more than the maximum
43 therapeutic dose recommended by the federal Food and Drug
44 Administration and that may be prescribed for unmonitored use by a
45 person in his or her home;

46 (4) "Moderate sedation" means a drug-induced depression of
47 consciousness during which (A) a person responds purposefully to
48 verbal commands, either alone or when accompanied by light tactile
49 stimulation, (B) intervention is not required to maintain a person's
50 airway and spontaneous ventilation is adequate, and (C) a person's
51 cardiovascular function is usually maintained; and

52 [(c)] (5) "Commissioner" means the Commissioner of Public Health.

53 Sec. 2. Subsection (a) of section 20-123b of the general statutes is
54 repealed and the following is substituted in lieu thereof (*Effective*
55 *October 1, 2015*):

56 (a) On and after the effective date of the regulations adopted in
57 accordance with subsection (d) of this section, no dentist licensed
58 under this chapter shall use moderate sedation, deep sedation or
59 general anesthesia, [or conscious sedation,] as these terms are defined
60 in section 20-123a, as amended by this act, on any patient unless such
61 dentist has a permit, currently in effect, issued by the commissioner,
62 initially for a period of twelve months and renewable annually
63 thereafter, authorizing the use of such moderate sedation, deep
64 sedation or general anesthesia. [or conscious sedation.] A dentist may
65 use minimal sedation, as defined in section 20-123a, as amended by
66 this act, without obtaining a permit issued by the commissioner.

67 Sec. 3. Subsection (a) of section 20-114 of the general statutes is
68 repealed and the following is substituted in lieu thereof (*Effective*
69 *October 1, 2015*):

70 (a) The Dental Commission may take any of the actions set forth in
71 section 19a-17 for any of the following causes: (1) The presentation to
72 the department of any diploma, license or certificate illegally or
73 fraudulently obtained, or obtained from an institution that is not
74 reputable or from an unrecognized or irregular institution or state
75 board, or obtained by the practice of any fraud or deception; (2) proof
76 that a practitioner has become unfit or incompetent or has been guilty
77 of cruelty, incompetence, negligence or indecent conduct toward

78 patients; (3) conviction of the violation of any of the provisions of this
79 chapter by any court of criminal jurisdiction, provided no action shall
80 be taken under section 19a-17 because of such conviction if any appeal
81 to a higher court has been filed until the appeal has been determined
82 by the higher court and the conviction sustained; (4) the employment
83 of any unlicensed person for other than mechanical purposes in the
84 practice of dental medicine or dental surgery subject to the provisions
85 of section 20-122a; (5) the violation of any of the provisions of this
86 chapter or of the regulations adopted hereunder or the refusal to
87 comply with any of said provisions or regulations; (6) the aiding or
88 abetting in the practice of dentistry, dental medicine or dental hygiene
89 of a person not licensed to practice dentistry, dental medicine or dental
90 hygiene in this state; (7) designating a limited practice, except as
91 provided in section 20-106a; (8) engaging in fraud or material
92 deception in the course of professional activities; (9) the effects of
93 physical or mental illness, emotional disorder or loss of motor skill,
94 including, but not limited to, deterioration through the aging process,
95 upon the license holder; (10) abuse or excessive use of drugs, including
96 alcohol, narcotics or chemicals; (11) failure to comply with the
97 continuing education requirements set forth in section 20-126c; (12)
98 failure of a holder of a [dental anesthesia or conscious sedation] permit
99 authorizing the use of moderate sedation, deep sedation or general
100 anesthesia to successfully complete an on-site evaluation conducted
101 pursuant to subsection (c) of section 20-123b; (13) failure to provide
102 information to the Department of Public Health required to complete a
103 health care provider profile, as set forth in section 20-13j; or (14) failure
104 to maintain professional liability insurance or other indemnity against
105 liability for professional malpractice as provided in section 20-126d. A
106 violation of any of the provisions of this chapter by any unlicensed
107 employee in the practice of dentistry or dental hygiene, with the
108 knowledge of the employer, shall be deemed a violation by the
109 employer. The Commissioner of Public Health may order a license
110 holder to submit to a reasonable physical or mental examination if his
111 or her physical or mental capacity to practice safely is the subject of an
112 investigation. Said commissioner may petition the superior court for

113 the judicial district of Hartford to enforce such order or any action
114 taken pursuant to section 19a-17.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2015</i>	20-123a
Sec. 2	<i>October 1, 2015</i>	20-123b(a)
Sec. 3	<i>October 1, 2015</i>	20-114(a)

PH *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note***State Impact:*** None***Municipal Impact:*** None***Explanation***

The bill, which updates statutory definitions of dental sedation and general anesthesia to reflect industry standards, is technical and has no fiscal impact.

The Out Years***State Impact:*** None***Municipal Impact:*** None

OLR Bill Analysis**HB 6937*****AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING THE DEFINITIONS OF SEDATION AND GENERAL ANESTHESIA.*****SUMMARY:**

This bill updates the statutory definitions of sedation and general anesthesia related to dentistry to reflect industry standards by:

1. eliminating the definition of "conscious sedation" in the dentistry statutes and replacing it with new definitions for "minimal sedation," "moderate sedation," and "deep sedation;"
2. updating the definition of "general anesthesia;"
3. extending to dentists using moderate or deep sedation existing permitting requirements for the use of general anesthesia; and
4. exempting dentists using minimal sedation from these permitting requirements.

The bill authorizes the state Dental Commission to take disciplinary action against a dentist permitted to use moderate or deep sedation for failing to successfully complete an on-site evaluation of his or her office. Among other things, this includes license revocation or suspension; censure; a letter of reprimand; or a civil penalty. (The commission may already take these actions for general anesthesia permit holders who fail to complete the evaluation).

EFFECTIVE DATE: October 1, 2015

PERMIT REQUIREMENTS

The bill extends to dentists using moderate or deep sedation

existing Department of Public Health (DPH) permitting requirements for the use of general anesthesia.

By law, to obtain a permit, a dentist must (1) pay a \$200 fee, (2) demonstrate compliance with American Dental Association Guidelines for Teaching and the Comprehensive Control of Pain and Anxiety in Dentistry, and (3) successfully complete an on-site evaluation of his or her office. A DPH-approved site evaluator must conduct the on-site visit in consultation with the Connecticut Society of Oral and Maxillofacial Surgeons.

DPH may renew permits annually, provided the dentist (1) pays a \$200 renewal fee and (2) completes an on-site evaluation at least once every five years.

DEFINITIONS

General Anesthesia

The bill defines “general anesthesia” as a drug-induced loss of consciousness during which a person

1. is not able to be aroused, even by painful stimulation;
2. often has an impaired ability to independently maintain ventilator function;
3. often requires assistance maintaining his or her airway and may require positive pressure ventilation because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function; and
4. may have impaired cardiovascular function.

Under current law, general anesthesia means a controlled state of unconsciousness produced by pharmacologic or nonpharmacologic methods, or a combination of the two. It is accompanied by a partial or complete loss of a person’s protective reflexes, including an inability to independently maintain an airway and respond to physical stimulation or verbal commands.

Deep Sedation

The bill defines “deep sedation” as a drug-induced depression of consciousness during which

1. a person cannot be easily aroused but responds purposefully following repeated or painful stimulation;
2. a person’s ability to independently maintain ventilator function may be impaired;
3. a person may require assistance to maintain his or her airway, and spontaneous ventilation may be inadequate; and
4. cardiovascular function is usually maintained.

Minimal Sedation

The bill defines “minimal sedation” as a minimally depressed level of consciousness that

1. is produced by a pharmacological method that retains a person’s ability to independently and continuously maintain an airway and to respond appropriately to physical stimulation or a verbal command,
2. may result in modest impairment of cognitive function and coordination but does not affect a person’s ventilator and cardiovascular function, and
3. is produced by nitrous oxide or an orally administered sedative (a) using no more than the maximum therapeutic dose recommended by the federal Food and Drug Administration (FDA) and (b) that may be prescribed to a person for unmonitored use at home.

Moderate Sedation

The bill defines “moderate sedation” as a drug-induced depression of consciousness during which

1. a person responds purposefully to verbal commands, either alone or when accompanied by light tactile stimulation;
2. intervention is not required to maintain a person's airway, and spontaneous ventilation is adequate; and
3. a person's cardiovascular function is usually maintained.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 27 Nay 0 (03/23/2015)